

RECEIVED
CENTRAL FAX CENTER

MAR 23 2005

FAX COVER SHEET

TO	Mail Stop Petition
COMPANY	USPTO
FAX NUMBER	17038729306
FROM	Tracy Druce
DATE	2005-03-23 20:20:01 GMT
RE	Application No. 10/063,159 - Our 06730.0018.NPUS00 - Petition and Response

COVER MESSAGE

Please enter the attached Response and Related Papers (17 pages total)

Tracy W. Druce
Novak Druce & Quigg, LLP

/mmy

GET FREE ONLINE FAX DELIVERY FROM eFAX
WWW.EFAX.COM

PTO/SB/21 (09-04)

Approved for use through 07/31/2006. OMB 0651-0031
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

**TRANSMITTAL
FORM**

(to be used for all correspondence after initial filing)

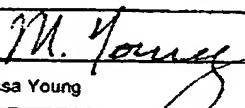
Total Number of Pages in This Submission

Application Number	10/063,159
Filing Date	03-26-2002
First Named Inventor	AKERLUND, Roger
Art Unit	3763
Examiner Name	MAJORINO, ROZ
Attorney Docket Number	06730.0018.NPUS00

ENCLOSURES (Check all that apply)																		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input checked="" type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD. Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): <input type="checkbox"/> Credit Card Authorization																
Remarks																		
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT <table border="1"> <tr> <td>Firm Name</td> <td colspan="3">Novak Druce & Quigley LLP</td> </tr> <tr> <td>Signature</td> <td colspan="3"></td> </tr> <tr> <td>Printed name</td> <td colspan="3">Tracy W. Druce</td> </tr> <tr> <td>Date</td> <td>23 Mar 05</td> <td>Reg. No.</td> <td>35,493</td> </tr> </table>			Firm Name	Novak Druce & Quigley LLP			Signature				Printed name	Tracy W. Druce			Date	23 Mar 05	Reg. No.	35,493
Firm Name	Novak Druce & Quigley LLP																	
Signature																		
Printed name	Tracy W. Druce																	
Date	23 Mar 05	Reg. No.	35,493															

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:

Signature	
Typed or printed name	Melissa Young
Date	23 Mar 05

This collection of information is required by 37 CFR 1.6. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.